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CONFIRMATION NO. 9051

SERIAL NUMBER 09/491,787	FILING DATE 01/26/2000 RULE	CLASS 386	GROUP ART UNIT 2612	ATTORNEY DOCKET NO. INTL-0317-US (P8000)
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APPLICANTS

Andrew T Wilson, Portland, OR;
 David B Kinder, Portland, OR;

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MAY 22 2003

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

Technology Center 2600

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/10/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 13	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

ADDRESS

Blakely Sokoloff Taylor & Zafman, LLP
 1279 Oakmead Parkway
 Sunnyvale, CA 94085-4040

TITLE

Broadcast pause and resume for enhanced television

FILING FEE RECEIVED 798	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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ADDRESS Timothy N Trop Trop Pruner Hu & Miles PC 8554 Katy Freeway Suite 100 Houston ,TX 77024										
TITLE Broadcast pause and resume for enhanced television										
FILING FEE RECEIVED 798	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1" style="float: right;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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